Fill	in this information to identify your case:					
Debtor 1 Jeffrey Stuckey			Check if this is:			
				An amended filing		
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS				A supplement show 13 expenses as of	ving postpetition chapter the following date:	
		YLVANIA		MM / DD / YYYY		
	enumber 17-17537 nown)					
0	fficial Form 106J					
S	chedule J: Your Expenses				12/1	
info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question. 11: Describe Your Household					
1 ai	Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?					
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Housel	nold of De	btor 2.		
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state the	0			□ No	
	dependents names.	Grandson		_ 1	■ Yes □ No	
		Wife		4	■ Yes	
		Com		47	□ No	
		Son			■ Yes □ No	
		Son		17	■ Yes	
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes					
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your senses as of a date after the bankruptcy is filed. If this is a supplibilicable date.					
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Ye</i> ficial Form 106I.)			Your exp	enses	
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	486.18	
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$	0.00	
	4b. Property, homeowner's, or renter's insurance		4b.	· ———	0.00	
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. 4d.	·	20.00 0.00	

Additional mortgage payments for your residence, such as home equity loans

5. \$

0.00

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1 Jeffrey	Stuckey	Case number (if known)	17-17537
	, heat natural das	60 °C		420.00
•	•	•		130.00
				84.00
		•		110.00
	-	· · ·		0.00
		•		380.00
				0.00
-		•		140.00
-		· .		20.00
	·	11. \$		30.00
		12. \$		80.00
		13. \$		0.00
		14. \$		0.00
		ι ψ		0.00
	nsurance deducted from your pay or included in lines 4 or 20.			
	, , ,	15a. \$		0.00
5b. Health ins	surance	15b. \$		0.00
		15c. \$		0.00
		· .		0.00
	· · ·			0.00
pecify:		16. \$		0.00
		17a. \$		0.00
		•		0.00
. ,				0.00
	-			0.00
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	,	•		0.00
	perty expenses not included in lines 4 or 5 of this form or on		ncome.	
		20a. \$		0.00
	· · ·	20b. \$		0.00
		· .		0.00
				0.00
		•		0.00
witer. Specify:	nancuts	∠1. +⊅		50.00
alculate your	monthly expenses			
2a. Add lines 4	through 21.	\$;	1,530.18
2b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2 \$		
				1,530.18
	and 110 foods to your monthly expended.		·	1,000.10
-				
		23a. \$		1,841.17
3b. Copy you	r monthly expenses from line 22c above.	23b\$		1,530.18
	your monthly expenses from your monthly income.			240.00
The result	t is your monthly net income.	23c. \$		310.99
o you expect	an increase or decrease in your expenses within the year af			
o you expect or example, do yo	an increase or decrease in your expenses within the year af you expect to finish paying for your car loan within the year or do you expe terms of your mortgage?			ase or decrease because of a
o you expect or example, do yo	ou expect to finish paying for your car loan within the year or do you expe			ase or decrease because of a
	kilities: a. Electricity b. Water, se c. Telephon d. Other. Sp cood and house childcare and clothing, launce dersonal care ledical and def cransportation do not include of contertainment, charitable con distribution b. Health ins 5c. Vehicle ir 5d. Other ins axes. Do not in pecify: astallment or 7a. Car paym 7b. Car paym 7c. Other. Sp 7d. Other. Sp 7d. Other. Sp 7d. Other. Sp 7d. Other sp cour payments educted from ther payment pecify: astallies become consumer content cont	itilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: ood and housekeeping supplies childcare and children's education costs clothing, laundry, and dry cleaning ersonal care products and services ledical and dental expenses transportation. Include gas, maintenance, bus or train fare. to not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books charitable contributions and religious donations surance. to not include insurance deducted from your pay or included in lines 4 or 20. 5a. Life insurance 5b. Health insurance 5c. Vehicle insurance 5c. Vehicle insurance. Specify: axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify: materialment or lease payments: 7a. Car payments for Vehicle 1 7b. Car payments for Vehicle 2 7c. Other. Specify: our payments of alimony, maintenance, and support that you did not repreducted from your pay on line 5, Schedule I, Your Income (Official Form 1) wither payments you make to support others who do not live with you. pecify: wher real property expenses not included in lines 4 or 5 of this form or on 0a. Mortgages on other property 0b. Real estate taxes 0c. Property, homeowner's, or renter's insurance 0d. Maintenance, repair, and upkeep expenses 0c. Property, homeowner's, or renter's insurance 0d. Maintenance, repair, and upkeep expenses 0c. Property, homeowner's, or renter's insurance 0d. Maintenance, repair, and upkeep expenses 0c. Homeowner's association or condominium dues wher: Specify: haircuts laculate your monthly expenses for Debtor 2), if any, from Official Form 10 2c. Add lines 24 through 21. 2b. Copy line 12 (your combined monthly income) from Schedule 1. 3b. Copy your monthly expenses from line 22c above.	Itilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: cod and housekeeping supplies hildicare and children's education costs diction, laundry, and dry cleaning ersonal care products and services ledical and dental expenses ransportation. Include gas, maintenance, bus or train fare. lo not include car payments. ro not include car payments. lo not include car payments. lo not include insurance deducted from your pay or included in lines 4 or 20. 5a. Life insurance lo not include insurance deducted from your pay or included in lines 4 or 20. 5b. Health insurance fib. Sh. Health insurance fib. Solder insurance. Specify: descended to recommend to the fib. Sh. fib. Sh. Health insurance fib. Car payments for Vehicle 1 fib. Sh. fib. Sh	tilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, lend the property code and housekeeping supplies d. Other. Specify: cod and housekeeping supplies hildcare and children's education costs d. Other. Specify: cod and housekeeping supplies hildcare and children's education costs d. Separate code and children's education costs dedical and dental expenses for Debtor 2), if any, from Official Form 106J-2 dedical expenses for Debtor 2), if any, from